



# CITY OF MURRIETA

Development Services Department

Planning Division

1 Town Square | Murrieta, CA 92562 | 951-461-6061

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## Commercial Filming Application (Temporary Use Permit) (DS-258)

A Temporary Use Permit is required for certain projects that because of their nature or operation may affect neighboring properties. In order to ensure compatibility with neighboring properties, The Planning Division will review such items as traffic, relationship with surrounding properties, and the operation of the use. The Planning Division and other reviewing disciplines may require certain conditions that ensure that the proposed filming activities will not cause an adverse impact to the neighborhood. The information listed in this application is required to be completed for all commercial filming activities being processed under the Murrieta Municipal Code (MMC) Section 16.70.030(K). Refer to Information Bulletin #IB-230 for additional information.

### INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

**For Planning Division Office Use Only**

Case Number: \_\_\_\_\_ Date Submitted: \_\_\_\_\_ Received by: \_\_\_\_\_

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### I. FILING INSTRUCTIONS FOR COMMERCIAL FILMING APPLICATION (TEMPORARY USE PERMIT)

The following instructions are intended to provide the necessary information and procedures to facilitate the processing of a Commercial Filming Application (Temporary Use Permit). Your cooperation with these instructions will insure that your application can be processed in the most expeditious manner possible.

**THE COMMERCIAL FILMING APPLICATION (TEMPORARY USE PERMIT) PACKAGE MUST CONSIST OF THE FOLLOWING:**

Please contact the Planning Division to verify submittal requirements. City staff may request additional items based on initial review.

#### INITIAL SUBMITTAL (TO BE CONFIRMED BY STAFF):

##### PROVIDED?

- YES  NO  COMPLETED AND SIGNED COMMERCIAL FILMING APPLICATION (TEMPORARY USE PERMIT).
- YES  NO  THE APPROPRIATE FEE FOR THE APPLICATION TYPE OR TYPES. TO VIEW THE FEE SCHEDULE, GO TO: <https://www.murrietaca.gov/departments/planning/default.asp>
- YES  NO  SEVEN (7) SETS OF SITE PLAN (FOLDED TO 8 ½" X 11") AND A DIGITAL COPY (IF AVAILABLE)
- YES  NO  COMPLETED TEMPORARY COMMERCIAL FILMING INDEMNIFICATION AND HOLD HARMLESS FORM (EXHIBIT #A)

**FOLLOW UP ITEMS (TO BE CONFIRMED BY STAFF):**

**PROVIDED?**

YES  NO  COMMERCIAL LIABILITY INSURANCE POLICY (EXHIBIT #B) (ATTACH POLICY TO THIS FORM)

- INSURANCE COMPANY NAME AND ADDRESS
- INSURED NAME AND ADDRESS
- POLICY NUMBER AND PERIOD
- THE CITY OF MURRIETA SHALL BE NAMED AS ADDITIONALLY INSURED
- POLICY SHALL INCLUDE - COMMERCIAL GENERAL LIABILITY, AUTO LIABILITY, PROOF OF WORKERS COMPENSATION
- \$1 MILLION PER OCCURRENCE AND \$2 MILLION AGGREGATE
- ADDITIONAL INSURANCE MAY BE REQUIRED ON A CASE-BY-CASE BASIS DEPENDING ON THE ASSOCIATED ACTIVITY

YES  NO  CITY OF MURRIETA BUSINESS LICENSE- Please contact Business Licensing at (951) 461-6040 OR VISIT <https://www.murrietaca.gov/departments/finance/license/default.asp>

YES  NO  ADDITIONAL INSURANCE (IF APPLICABLE), HAZARDS, AIRCRAFT, DRONES, ETC.

YES  NO  ENCROACHMENT PERMIT (FOR FILMING AT ROADWAYS OR SIMILAR LOCATIONS) (IF APPLICABLE)

YES  NO  TRAFFIC CONTROL PLAN (FOR FILMING AT ROADWAYS OR SIMILAR LOCATIONS)

YES  NO  HAZARDOUS ACTIVITIES AND CONTROL METHODS PLAN (AS DETERMINED BY POLICE AND FIRE)

YES  NO  COPY OF THE DRONE PILOT'S FAA LICENSE (IF APPLICABLE)

YES  NO  COPY OF THE FAA REGISTRATION CARD FOR EACH DRONE THAT WILL BE ON LOCATION (IF APPLICABLE)

YES  NO  A MAP SHOWING THE FLIGHT AREA (IF APPLICABLE)

YES  NO  FAA APPROVAL (IF APPLICABLE)

**AT APPROVAL (TO BE CONFIRMED BY STAFF):**

**PROVIDED?**

YES  NO  ALL ITEMS REQUIRED AS PART OF INITIAL AND FOLLOW-UP SUBMITTAL PHASES

YES  NO  APPLICATION SIGNED-OFF BY ALL APPLICABLE DEPARTMENTS

**II. LOCATION INFORMATION**

(Attached additional sheets if needed)

Please provide specifics about your shoot, describing the scenes to be shot at each location and any use:

Assessor's Parcel Number(s): \_\_\_\_\_

Property Address (Cross-Streets if not addressed/ Or identifying Feature(s)): \_\_\_\_\_

\_\_\_\_\_



**DATE/TIME OF ACTIVITIES? (INCLUDING PREPARATION AND STRIKING DAYS)**

DATE:

START \_\_\_\_\_ END \_\_\_\_\_

TIME:

START \_\_\_\_\_ AM/PM (CIRCLE) END \_\_\_\_\_ AM/PM (CIRCLE)

**NUMBER OF INDIVIDUALS IN CAST AND CREW?** \_\_\_\_\_

**EQUIPMENT DETAIL:** (Please supply total number of each of the following items to be used at the filming location(s).

GENERATORS \_\_\_\_\_ LARGE TRUCKS \_\_\_\_\_ MOTOR HOMES \_\_\_\_\_ VANS \_\_\_\_\_ TRAILERS \_\_\_\_\_

CAMERA CARS \_\_\_\_\_ PICTURE VEHICLES \_\_\_\_\_ CAST/CREW CARS \_\_\_\_\_ OTHER \_\_\_\_\_

**YES  NO  ARE THERE VEHICLES ASSOCIATED WITH THE PRODUCTION/PROJECT?**

(Attached additional sheets if needed)

Make: \_\_\_\_\_ Model: \_\_\_\_\_ License: \_\_\_\_\_

**YES  NO  AIRCRAFT/DRONES ASSOCIATED WITH THE PRODUCTION/PROJECT?**

(Please describe and attached additional sheets if needed) (Please Note: Additional insurance/fees may be required as determined on a case-by-case basis)

\_\_\_\_\_  
\_\_\_\_\_

**AIRCRAFT**

An additional Insurance Certificate is required in the event of use of airplanes or helicopters with an **additional insurance certificate and Letter of Endorsement required in the amount as determined by the City.** FAA approval, in writing, is also required.

**DRONES**

An additional Insurance Certificate is required in the event of the use drones with an **additional insurance certificate and Letter of Endorsement required in the amount as determined by the City.** Also required are as follows:

- Copy of the drone pilot’s FAA license
- Copy of the FAA registration card for each drone that will be on location
- A map showing the flight area

**YES  NO  ARE THE USE WILD ANIMALS, CHEMICALS, EXPLOSIVES OR FIRE OR SIMILAR SPECIAL EFFECTS, OR INTENDS TO ENGAGE IN ANY OTHER HAZARDOUS ACTIVITY ASSOCIATED WITH THE PRODUCTION/PROJECT?**

(Fire and Police would need to review specific activities)(Please describe, and attached additional sheets if needed)

\_\_\_\_\_  
\_\_\_\_\_

- Hazardous Activities and Control Methods Plan (As determined by Fire and Police)
- Additional insurance/applicable review fees may be required as determined on a case-by-case basis.

**IV. CONTACT INFORMATION**

**APPLICANT**

PLEASE INDICATE WHICH OF FOLLOWING WILL FUNCTION AS THE AUTHORIZED REPRESENTATIVE AND CONTACT FOR THIS APPLICATION FOR WHOM THE PERMIT WILL BE ISSUED TO:

(SELECT ONLY **ONE**): DIRECTOR  FIRST ASSISTANT DIRECTOR  UNIT PRODUCTION MANAGER   
UNIT LOCATION MANAGER  OTHER \_\_\_\_\_

**APPLICANT**

Contact Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Company Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: ( ) \_\_\_\_\_ Fax No.: ( ) \_\_\_\_\_

**SECONDARY CONTACT** (Representative for Production or Project)

(SELECT ONLY **ONE**): DIRECTOR  FIRST ASSISTANT DIRECTOR  UNIT PRODUCTION MANAGER   
UNIT LOCATION MANAGER  OTHER \_\_\_\_\_

Contact Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Company Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: ( ) \_\_\_\_\_ Fax No: ( ) \_\_\_\_\_

**THIRD CONTACT (AS DETERMINED)** (Representative for Production or Project)

(SELECT ONLY **ONE**): DIRECTOR  FIRST ASSISTANT DIRECTOR  UNIT PRODUCTION MANAGER   
UNIT LOCATION MANAGER  OTHER \_\_\_\_\_

Contact Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Company Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State ZIP

Daytime Phone No: ( ) \_\_\_\_\_ Fax No: ( ) \_\_\_\_\_

## GENERAL TERMS, CONDITIONS, AND RESTRICTIONS

**AUTHORITY** This permit is issued by the authority of the City of Murrieta, for the purpose of photographing, filming, or videotaping in the City of Murrieta in accordance with Section 16.70.030(K) MMC. **This permit does not constitute or grant permission to use or occupy property not belonging to, or under the control of, the City of Murrieta. Permission to use or occupy these properties must be obtained from the owner or controller of such property in addition to this permit.** Proof of such permission may be required prior to issuance of a permit by completing an Addendum form. **PERMIT REQUIREMENT** This permit must be in the possession of the applicant at all times while on location and must be made available for inspection when requested by City authorities or the public. Use of this permit implies agreement on the part of the holder to comply with the terms and conditions of the permit. **COMPLIANCE WITH LAWS** Permittee agrees to comply with all federal, state, and local laws, regulations, ordinances, and rules. Vehicle code provisions and/or posted parking regulations will be enforced unless noted otherwise in this permit. The Filming Fire and Life Safety Inspection Check List will be strictly enforced. **INSURANCE** Prior to beginning operations under this permit, Permittee must submit evidence of general liability insurance. The amount and type of such insurance shall be that required by the City of Murrieta at the time this permit is issued, unless a different amount and type of insurance is specified in the permit. If Permittee uses or operates licensed motor vehicles pursuant to this permit, automobile liability insurance is required as well. **INDEMNIFICATION** Except for the active negligence or tortuous conduct of the City of Murrieta, Permittee agrees to indemnify, defend and hold harmless the City and any other agencies designated at permittor, their agents, officers, employees, and contractors from and against any and all liability, expense, including defense costs and legal fees and claims for damages of any nature as noted in further detailed in **Exhibit #A. WORKER'S COMPENSATION** By signing below, Permittee agrees to conform to all applicable Federal and State requirements for Worker's Compensation insurance for all persons operating under this permit. **ASSIGNMENT** This permit shall not be assigned by the Permittee without the written consent of the City. **CONSIDERATION** Permittee shall pay, prior to the issuance of a permit or rider thereto, all fees and deposits required. Service charges and use fees listed on this form are estimates. Actual charges, computed at the completion of filming, may be less or exceed these estimates. Permittee agrees to pay any additional charges which may accrue incidental to any use or service provided to the Permittee within 10 days after receipt of any invoice for such use or services. Overpayments will be refunded. **CREDIT** The City of Murrieta expects film credit, unless otherwise determined by an authorized representative of the City of Murrieta **AUTHORITY TO REVOKE OR CANCEL** In the event that an authorized representative of the City finds that the activities being conducted by the Permittee unnecessarily endanger the health or safety of any person or that said activities are or will cause damage to real or personal property, said representative, at his sole direction may suspend, cancel, or amend this permit. The City reserves the right to suspend, cancel, or amend this permit at any time without incurring any liability to the Permittee. **RIDERS** Additional documents known as "riders" may, on occasion, be issued to alter or amend an original permit. Except as amended by the riders, all other terms, conditions, and provisions of the original permit remain in effect. When executed, a rider becomes part of and must be attached to the original permit. **ADDITIONAL TERMS APPLICABLE TO FILMING ON CITY OWNED PROPERTY** Permittee shall be subject to the control and instructions of the City representative(s) assigned to the Permittee in order to avoid any interference with the operations of the City's facilities or property.

Permittee acknowledges that its use of City facilities for purposes of the permit is at its own risk and expressly waives any right to make or prosecute claims or demands against the City for any loss, injury, or damage which Permittee may sustain by virtue of the exercise of the permission granted or by reason of any defect, deficiency, or impairment which may occur from time to time from any cause of the utilities or other services furnished or for any loss resulting from fire, water, tornado, civil commotion, riot, landslide, windstorm, earthquake or acts of God. On or before the date of the expiration of this permit, the Permittee shall remove from said properties all location sets, structures, rubbish and unsightly matter placed on the property by the Permittee unless the City agrees that this may be done at a later time. In the event Permittee fails to do so, the City may cause the same to be done and Permittee agrees to pay the City any cost incurred. Permittee agrees to pay the City for damage to City property resulting from the operations undertaken by Permittee. By issuance of this permit, the City does not imply that use by Permittee shall be exclusive. We hereby accept this permit and agree to abide by all the terms and conditions thereof.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_

\_\_\_\_\_

**FOR-INTERNAL-USE-ONLY**

**APPROVAL (INITIALS):**

<b>PLANNING</b>	<b>PUBLIC WORKS</b>	<b>FIRE</b>	<b>POLICE</b>	<b>BUSINESS LICENSE</b>
<b>DATE:</b>				

## SITE PLAN CRITERIA

The following information is to be shown on the site plan submitted as part of an application for a Commercial Filming Application (Temporary Use Permit). Distinguished between existing (dashed lines) and proposed (solid lines) and show sufficient dimensions to adequately describe the project/production proposed.

1. Property lines and dimensions.
2. Building and structure footprints (if applicable).
3. All abutting streets.
4. Parking lot layout handicapped facilities and all curbs, sidewalks, etc. Show number of parking stalls (if applicable).
5. Location of road closures (if applicable) and type of equipment to be used.
6. Location and method of outdoor lighting for buildings and parking lot (if applicable).
7. Location and number of portable restrooms including handicap.
8. Location of proposed and existing fire extinguishers.
9. All points of ingress and egress.
10. Location of all proposed signage. (if applicable).
11. Location of medical services (if applicable).
12. A vicinity map.

# EXHIBIT #A TEMPORARY COMMERCIAL FILMING INDEMNIFICATION & HOLD HARMLESS FORM & INSURANCE EXHIBIT

## INDEMNIFICATION AND HOLD HARMLESS AGREEMENT FOR USE OF CITY GROUNDS AND FACILITIES

In consideration for the use of City grounds and facilities and to the furthest extent allowed by law, Applicant does hereby agree to indemnify, hold harmless and defend the City of Murrieta ("City") and each of its officers, officials, employees, agents and volunteers from any and all loss, liability, fines, penalties, forfeitures, costs and damages (whether in contract, tort or strict liability, including but not limited to personal injury, death at any time and property damage) incurred by City, Applicant or any other person, and from any and all claims, demands and actions in law or equity (including attorney's fees and litigation expenses), arising or alleged to have arisen directly or indirectly out of the use of City ground and facilities. Applicant's obligations under the preceding sentence shall apply regardless of whether City or any of its officers, officials, employees, agents or volunteers are negligent, but shall not apply to any loss, liability, fines, penalties, forfeitures, costs or damages caused solely by the gross negligence, or caused by the willful misconduct, of City or any of its officers, officials, employees, agents or volunteers.

Throughout the life of this Agreement, Applicant shall pay for and maintain in full force and effect all insurance as required in Exhibit #B, which is incorporated into and part of this Agreement, or as may be authorized or required in writing by City Manager or his/her designee at any time and in his/her sole discretion.

Applicant shall conduct all defense at his/her/its sole cost. The fact that insurance is obtained by Applicant shall not be deemed to release or diminish the liability of Applicant, including, without limitation, liability assumed under this Agreement. The duty to indemnify shall apply to all claims regardless of whether any insurance policies are applicable. The duty to defend hereunder is wholly independent of and separate from the duty to indemnify and such duty to defend exists regardless of any ultimate liability of Applicant. The policy limits do not act as a limitation upon the amount of defense and/or indemnification to be provided by Applicant. Approval or purchase of any insurance contracts or policies shall in no way relieve from liability nor limit the liability of Applicant, its officials, officers, employees, agents, volunteers or invitees.

City shall be reimbursed for all costs and attorney's fees incurred by City in enforcing this Agreement. This Indemnification and Hold Harmless Agreement shall survive the use of City grounds and facilities.

**The undersigned acknowledges that he/she (i) has read and fully understands the content of this Indemnification and Hold Harmless Agreement; (ii) is aware that this is a contract between the City and Applicant; (iii) has had the opportunity to consult with his/her attorney, in his/her discretion; (iv) is fully aware of the legal consequences of signing this document; and (v) is the Applicant or his/her/its authorized signatory.**

Signed, sealed and delivered this \_\_\_\_\_ day of \_\_\_\_\_ 2019.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

# EXHIBIT #B

## COMMERCIAL LIABILITY INSURANCE EXAMPLE

(Please attached insurance documents once completed)

<b>ACORD®</b>		<b>CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY)
PRODUCER <b>INSURANCE AGENT NAME</b> <b>INSURANCE AGENT ADDRESS</b>		THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.		
INSURED <b>INSURED NAME</b> <b>INSURED ADDRESS</b>		INSURERS AFFORDING COVERAGE <b>INSURANCE COMPANY NAME(S)</b>		NAIC #
		INSURER A:		
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
<b>COVERAGES</b>				
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.				
INBR ADDL LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)
	<input type="checkbox"/> GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> AGG <input type="checkbox"/> LOC	<b>POLICY NUMBER</b>	<b>CURRENT POLICY PERIOD</b>	<b>CURRENT POLICY PERIOD</b>
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HERED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	<b>POLICY NUMBER</b>	<b>CURRENT POLICY PERIOD</b>	<b>CURRENT POLICY PERIOD</b>
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO			
	<input type="checkbox"/> EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE \$ <input type="checkbox"/> RETENTION \$			
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <small>ANY PROPRIETOR OR PARTNER EXCLUSIVE OFFICER/EMPLOYEE EXCLUDED? If yes, describe under SPECIAL PROVISIONS below</small> <input type="checkbox"/> OTHER	<b>POLICY NUMBER</b>	<b>CURRENT POLICY PERIOD</b>	<b>CURRENT POLICY PERIOD</b>
LIMITS EACH OCCURRENCE DAMAGE TO RENTED PREMISES (As occurrence) \$1,000,000 MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPROP AGG \$ COMBINED SINGLE LIMIT (As accident) \$ BODILY INJURY (Per person) \$1,000,000 BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$ EACH OCCURRENCE \$1,000,000 AGGREGATE \$2,000,000 WC STATUS <input type="checkbox"/> EMP LIMITS <input type="checkbox"/> OTH \$K E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$1,000,000				
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS <p style="text-align: center;">The City of Murrieta, its officers, employees and agents as additionally insured.</p>				
<b>CERTIFICATE HOLDER</b>		<b>CANCELLATION</b>		
City of Murrieta 1 Town Square Murrieta, CA 92562		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE		
ACORD 25 (2001/08)		© ACORD CORPORATION 1988		

**Coverage**

**Commercial General Liability**

**Auto Liability**

**Proof of Workers Compensation**

**Limits**

**\$1 Million per Occurrence**

**\$2 Million Aggregate**

**Additionally Insured**

***The City of Murrieta, its officers, employees and agents named.***

***If a policy contains a "blanket" additionally insured, then the Certificate must note "City of Murrieta as additionally insured per by "blanket endorsement".***

***If policy has no blanket endorsement refer to following page for endorsement***

**Insurance Company**

***Must be licensed to do business in California.***

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

SCHEDULE

Name of Person or Organization:

The City of Murrieta, its officers, employees, and agents.

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.